PTO/SB/21 (10-07) Approved for use through 10/31/2007. OMB 0651-0031 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to ection of information unless it displays a valid OMB control number. **Application Number** 10/630.531 Filing Date TRANSMITTAL July 30, 2003 First Named Inventor FORM Morris, Daniel Art Unit 3629 **Examiner Name** Meyers, Matthew (to be used for all correspondence after initial filing) Attorney Docket Number 037925.0004 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC ✓ Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC ✓ Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Postcard Return Receipt Request for Refund Express Abandonment Request Cited References Check \$525.00 Extension of Time Pelition CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Williams Mullen

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Reg. No.

38,076

Signature

Date

Printed name

uom

Thomas F. Bergert

November 6, 2007

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Complete if Known   FEE TRANSMITTAL   Filing Date   1063.0.531   Filing Date   July 30, 2003   First Named Inventor   Morris, Daniel   Examiner Name   Meyers, Matthew   Art Unit   3629   Attorney Docket No.   D374.95   COULY	PTO/SB. Approved for use through 06/30/2010. OMB U.S. Patent and Trademark Office; U.S. DEPARTMENT OF CO Under the Paperwork eduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control								
FEE TRANSMITTAL For FY 2008    Applicant claims small entity status. See 37 CFR 1.27   TOTAL AMOUNT OF PAYMENT   (\$) 525.00   Attomey Docket No.   3629	Effective on 12/08/2004.				Complete if Known				
FOR FY 2008    First Named Inventor   Morris, Danie    Examiner Name   Meyers, Matthew   Meyers, Matth					Application Numb	oer 10/	10/630,531		
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Applicant claims small entity status. See 37 CFR 1.27   TOTAL AMOUNT OF PAYMENT   (\$) 525.00   Attorney Docket No.   D374 25	For FY 2008				irst Named Inve	ntor Mo	Morris, Daniel		
TOTAL AMOUNT OF PAYMENT  (\$) 525.00  Attorney Docket No. D37435 . CCCH  Deposit Account Name: Williams Mullen  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge eavy additional fee(s) or underpayments of fee(s)  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Small Entity  Fee (S) Fee (	A licent object and patient at the state Con 27 CED 127				Examiner Name	Ме	Meyers, Matthew		
METHOD OF PAYMENT (check all that apply)   ✓ Check Credit Card Money Order None Other (please identify):  ✓ Check Credit Card Money Order None Other (please identify):  ✓ Deposit Account Deposit Account Number: 50-0766 Deposit Account Name: Williams Mullen  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below Credit card information of the form may be seen public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES SEARCH FEES SEARCH FEES Small Entity  Application Type Fee (\$) Fee (	Applicant claims small entity status. See 37 CFR 1.27				Art Unit				
Check	TOTAL AMOUNT OF PAYMENT (\$) 525.00				Attorney Docket N	No.	037925.0004		
Poposit Account Deposit Account Number: 50-0766   Deposit Account Name: Williams Mullen	METHOD OF PAYMENT (check all that apply)								
Poposit Account Deposit Account Number: 50-0766   Deposit Account Name: Williams Mullen	Check Credit Card Money Order None Other (please identify):								
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WARNING: Information on this form my become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.    FEE CALCULATION	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
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Application Type									
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March   See (\$)   Fee (\$	FILING FEES SEARCH FEES EXAMINATION FEES								
Design   210   105   100   50   130   65	<b>Application Type</b>							Fees Paid (\$)	
Plant   210   105   310   155   160   80	Utility	310	155	510	255	210	105		
Reissue 310 155 510 255 620 310  Provisional 210 105 0 0 0 0 0  2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claims over 3 (including Reissues)  Multiple dependent claims  Total Claims  - 20 or HP =	Design	210	105	100	50	130	65		
Provisional 210 105 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Plant	210	105	310	155	160	80		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims  Fee (\$)	Reissue	310	155	510	255	620	310		
Fee (\$)   Fee (\$)	Provisional	210	105	0	0	0	0	<del></del>	
Total Claims  - 20 or HP =	Fee DescriptionFee (\$)FeeEach claim over 20 (including Reissues)502Each independent claim over 3 (including Reissues)21010							Fee (\$) 25 105	
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Indep. Claims  - 3 or HP = x = x = =  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 =  - 100 =  / 50 =  (round up to a whole number) x  Fees Paid (\$)  Non-English Specification, \$130 fee (no small entity discount)		<u>LATIA OIAII</u>			<u>αια (ψ)</u>				
- 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof -100 = /50 = (round up to a whole number) x = Fee Paid (\$)  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)	_		-		aid (\$)				
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  - 100 =	- 3 or HP = x =								
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Other (e.g., late filing surcharge): petition for 3-month extension of time; small entity 525.00		cation, \$1	30 fee (no smal		•			Fees Paid (\$)	
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Registration No. (Attorney/Agent) Telephone 703, 760, 5200 38,076 mas Signature Name (Print/Type) Thomas F. Bergert Date

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